

I/DD & TBI COVID-19 Frequently Asked Questions (FAQ)

NC Innovations and TBI Waiver Appendix K Frequently Asked Questions

Category	Question	Answer(s)	Source
Employer of Record (EOR)	Are EORs [Employers of Record] included in “relatives” that can provide services?	When appendix K speaks of “Relatives Providing Services”, Relatives Providing Services is inclusive of relatives who are Employer of Records (EORs), Managing Employers for Agency With Choice, guardians, parents, representative. (4/21/2020)	LME/MCO Clinical Director's Call
Employer of Record (EOR)	Can an EOR [Employers of Record] provide services?	Yes, an EOR (Employer of Record), who is not the individual receiving services can provide services. (4/21/2020)	LME/MCO Clinical Director's Call
Employer of Record (EOR)	Can parents who are Employer of Record provide services for only adults on Innovations, or for children also? Thank you!	No, the current Appendix K allows ADULT (ages 18 and over) waiver beneficiaries ONLY to have relatives as direct support staff. A second Appendix K has been submitted to request this. (5/5/2020)	Webinars Hosted 4/7-8/2020
General	Does this [flexibilities within the Appendix K] apply to all LME/MCOs	This applies to all Innovations Waiver Beneficiaries across all LME/MCOs. Beneficiaries should contact their respective LME/MCO regarding implementation processes. (4/23/20)	Webinars Hosted 4/7-8/2020
General	How do I find out my LME/MCO?	The LME/MCO map can be found at the following link: https://www.ncdhhs.gov/providers/lme-mco-directory (4/24/2020)	
General	How often or quickly could changes happen to appendix K if additional changes are made moving forward?	Appendix K submissions will be submitted as additional COVID-19 related concerns continue to present service delivery concerns. (4/23/20)	Webinars Hosted 4/7-8/2020
General	Is there a phone line I can call if I feel lonely/isolated because my caregivers are not showing up or unable to show up?	The Hope4NC Helpline (1-855-587-3463) connects North Carolinians to additional mental health and resilience supports that help them cope and build resilience during times of crisis. Hope4NC is now available 24 hours per day, seven days a week to speak to a live person. (4/23/20)	North Carolina Council on Developmental Disabilities (NCCDD)

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General	What are some of the Innovations flexibilities (or different ways of providing support) available in the COVID-19 state of emergency?	The most current policy flexibilities can be found at the following link: https://medicaid.ncdhhs.gov/about-us/covid-19-guidance-and-resources/providers/covid-19-policy-flexibilities . Please also see our Special Medicaid Bulletins: https://medicaid.ncdhhs.gov/blog/2020/05/01/special-bulletin-covid-19-75-telehealth-and-virtual-patient-communications-clinical (5/5/20)	North Carolina Council on Developmental Disabilities (NCCDD)
General	What other flexibilities or ways of receiving support should individuals with disabilities and families know about?	The most current policy flexibilities can be found at the following link: https://medicaid.ncdhhs.gov/about-us/covid-19-guidance-and-resources/providers/covid-19-policy-flexibilities Please also see our Special Medicaid Bulletins: https://medicaid.ncdhhs.gov/blog/2020/05/01/special-bulletin-covid-19-75-telehealth-and-virtual-patient-communications-clinical (5/5/20)	North Carolina Council on Developmental Disabilities (NCCDD)
General	When will the second App [Appendix] K be submitted to CMS?	The second Appendix K was submitted May 1, 2020. (5/5/20)	Webinars Hosted 4/7-8/2020
General	Where can the slides and a recording of the presentation be found?	The slides and recordings can be found at the following link: https://medicaid.ncdhhs.gov/about-us/covid-19-guidance-and-resources/providers/covid-19-webinars#nc-innovations-and-tbi-waiver-webinar/call (5/1/2020)	Webinar Hosted 4.21.2020
General	Where can we get family friendly communication?	COVID-19 Guidance & Resources for Medicaid Beneficiaries can be found at the following link: https://medicaid.ncdhhs.gov/about-us/covid-19-guidance-and-resources/providers/covid-19-guidance-resources-medicaid . Also, you may contact your respective LME-MCO regarding individual/family specific guidance. NC DHHS continues to partner with the NC Council on Developmental Disabilities to produce family friendly resources. This information can be found at this link: https://nccdd.org/covid-19-resources.html (4/23/2020)	North Carolina Council on Developmental Disabilities (NCCDD)

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General	Why did DHHS seek these temporary changes because of the COVID-19 state of emergency?	To help individuals and families maintain services during the COVID-19 emergency. (4/23/20)	North Carolina Council on Developmental Disabilities (NCCDD)
General	Will all the [LME/]MCO's be working together on implementation.	This applies to all Innovations Waiver Beneficiaries across all LME/MCOs. Beneficiaries should contact their respective LME/MCO regarding implementation processes. (4/23/2020)	Webinars Hosted 4/7-8/2020
Hospital	Hi, thank you for hosting this webinar. Where does DHHS stand in terms of families accompanying a loved one with IDD [Intellectual/Developmental Disabilities] to the hospital during COVID-19? Has a policy been written? When can that be shared and where would families find it?	Please see the following information . COVID-19 Individuals and Families: https://www.ncdhhs.gov/divisions/public-health/covid19/individuals-and-families COVID-19 Health Care Providers, Hospitals and Laboratories: https://www.ncdhhs.gov/divisions/public-health/covid19/health-care-providers (4/23/20)	Webinars Hosted 4/7-8/2020
Hospital	If a consumer is hospitalized with COVID-19, no one is allowed to have contact with them while hospitalized so the option to provide CLS [Community Living and Supports] in the hospital is a moot point. Has DHHS made any arrangements for supports to be in place for I/DD population in the hospital setting?	Please see the following information . COVID-19 Individuals and Families: https://www.ncdhhs.gov/divisions/public-health/covid19/individuals-and-families COVID-19 Health Care Providers, Hospitals and Laboratories: https://www.ncdhhs.gov/divisions/public-health/covid19/health-care-providers (4/23/20)	Webinars Hosted 4/7-8/2020
Hospital	If an AFL consumer is hospitalized with COVID, and the AFL provider is allowed to stay with the consumer especially for communication assistance. What service is billed?	The appropriate service would be Community Living and Supports. In the event they do not have CLS, they should follow applicable processes with their respective LME/MCO regarding no prior authorization. (5/1/2020)	Webinar Hosted 4.21.2020
Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF-IID)	Has Therapeutic Leave been increased for ICF-IIDs [Intermediate Care Facilities for Individuals with Intellectual Disabilities]?	Yes, it has increased from 60 days to 90 days. Please see SPECIAL BULLETIN COVID-19 #45: Increase in Therapeutic Leave Days for ICF/IDD Facilities Due to COVID-19 . Please note that the CR modifier should not be used with RC0183 - this was in error and we will be publishing a correction. (5/5/2020)	LME/MCO Clinical Director's Call

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Personal Protective Equipment (PPE)	Who is responsible for providing PPE (personal protective equipment) such as masks and gloves for staff working in participant's home? Durham City and County recently made that requirement part of the updated local COVID 19 regulations. Staff working in a	DHHS has issued guidance for providers to request PPE. Guidance and information on how to request PPE can be found at https://www.ncdhhs.gov/divisions/public-health/covid19/health-care-providers-hospitals-and-laboratories/requesting-ppe (4/23/20)	Webinars Hosted 4/7-8/2020
Rate Setting/Staff Pay	As providers it is hard to give out money as hazard pay not knowing what the LME will do?	Service rates may vary by LME/MCO. Providers should contact their respective LME/MCO for additional information regarding rates. (4/28/20)	Webinar Hosted 4.21.2020
Rate Setting/Staff Pay	For direct support professionals who do work is there any hazard or appreciation wage increase?	Service rates may vary by LME/MCO. Providers should contact their respective LME/MCO for additional information regarding rates. (4/23/20)	Webinars Hosted 4/7-8/2020
Rate Setting/Staff Pay	Have the MCOs determined if AFLs are eligible for increases during COVID19?	Service rates may vary by LME/MCO. Providers should contact their respective LME/MCO for additional information regarding rates. (5/1/20)	Webinar Hosted 4.21.2020
Rate Setting/Staff Pay	Is rate setting by MCOs public knowledge? If MCO rate setting is a public matter how can we obtain this information?	Service rates may vary by LME/MCO. Providers should contact their respective LME/MCO for additional information regarding rates. Service rates are posted to the LME/MCO web-sites, as well. (4/28/20)	Webinar Hosted 4.21.2020
Rate Setting/Staff Pay	Will there be a rate increase in services such as Community Living and Supports	Service rates may vary by LME/MCO. Providers should contact their respective LME/MCO for additional information regarding rates. (4/28/20)	Webinar Hosted 4.21.2020
Rate Setting/Staff Pay	Will there be an increase amount for the AFL's during this Covid-19 due to Stay at home?	Service rates may vary by LME/MCO. Providers should contact their respective LME/MCO for additional information regarding rates. (4/23/20)	Webinars Hosted 4/7-8/2020
Rate Setting/Staff Pay	Will there be an increase in pay (hazardous pay) for staff providing direct personal care services?	Service rates may vary by LME/MCO. Providers should contact their respective LME/MCO for additional information regarding rates. (4/28/20)	Webinar Hosted 4.21.2020
Relative as Provider	[W]ith additional flexibility for RDSE [Relative as Direct Support Employee] are there max hours per day/per week that should be allowed?	Appendix K allows for additional hours due to COVID-19. Processes for implementation may vary by LME/MCO. Providers should contact their respective LME/MCO for additional information. 84 hours is the max allowable hours for relatives as providers. (4/28/2020)	Webinar Hosted 4.21.2020

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Relative as Provider	Are RADSE [Relative as Direct Support Employee] able to provide more than 56 hours? (up to 84?) and can there be more than 1 RADSE [Relative as Direct Support Employee] per home?	Yes. RADSEs (Relative as Direct Support Employee) should work with their providers and respective LME/MCOs regarding the increase in hours. (4/21/2020)	LME/MCO Clinical Director's Call
Relative as Provider	Can a relative as provider provide services over the Relative as Direct Support Employee (RADSE) limits identified in the Innovations Waiver?	Yes. RADSEs (Relative as Direct Support Employee) should work with their providers and respective LME/MCOs regarding the increase in hours. (4/21/2020)	LME/MCO Clinical Director's Call
Relative as Provider	Can family now be "staff" on the TBI [Traumatic Brain Injury] Waiver?	No, TBI (Traumatic Brain Injury) Waiver beneficiaries cannot have family members as staff. (4/23/20)	Webinars Hosted 4/7-8/2020
Relative as Provider	Does a RAP [Relative as Provider] Application still need to be completed, sent and approved by the MCO [Managed Care Organization]?	A Relative as Provider Application is not required; however the processes for implementation may vary by LME/MCO. Providers should contact their respective LME/MCO for additional information. (4/23/20)	LME/MCO Clinical Director's Call
Relative as Provider	For Partners MCO: Does the COVID-19 RELATED APPENDIX K REPORTING FORM count as the provider notifying the MCO of a new RAP [Relative as provider] or does the provider need to complete and submit the typical RADSE form that is required normally?	Processes for implementation may vary by LME/MCO. Providers should contact their respective provider and LME/MCO to inform them of their request and request additional information. Relatives/Family members must provide documentation of a high school diploma or higher, and must complete hiring documentation required by the provider. Background checks must be completed within 90 days of hire. Service documentation must be completed. (4/28/2020)	Webinar Hosted 4.21.2020
Relative as Provider	If a provider determines that a relative of provider does not meet hiring criteria due to background check. Will the services provided before the background check done require a pay back in the future?	No, If the background check indicates the relative should not provide services then the relative should not provide services as soon as this information is discovered. Providers are at risk for payback of services if services are not stopped as of the date they determine the background check disqualifies the relative from providing services. (5/5/20)	LME/MCO Clinical Director's Call

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Relative as Provider	If a relative is determined to be unqualified to render services, will they be denied reimbursement for all services rendered retroactively, or only on and after the date of the determination?	No, If the background check indicates the relative should not provide services then the relative should not provide services as soon as this information is discovered. Providers are at risk for payback of services if services are not stopped immediately. (4/28/20)	Webinar Hosted 4.21.2020
Relative as Provider	If a relative's background check comes back with information that indicates that s/he should not provide services, does the person still have 90 days to continue working?	No. If the background check indicates the relative should not provide services then the relative should not provide services as of the date they determine the background check disqualifies the relative from providing services.(5/5/2020)	LME/MCO Clinical Director's Call
Relative as Provider	If an individual receives Innovations residential services moves back to live with their family during the COVID-19 crisis, can the family provide services in the family home?	Appendix K allows for Relatives of adult waiver beneficiaries to provide Community Living and Supports, Day Supports, Supported Employment, Community Networking, and Supported Living. The Waiver beneficiary and/or legally responsible party should contact their respective LME/MCO regarding applicable processes. (4/23/20)	North Carolina Council on Developmental Disabilities (NCCDD)
Relative as provider	Is the high school education requirement waived?	No, direct care staff are required to have a high school diploma, GED or higher. (4/21/2020)	LME/MCO Clinical Director's Call
Relative as Provider	What if the parent submits a request to provide additional hours without any justification?	Appendix K allows for additional hours due to COVID-19. Services must be medically necessary. Processes for implementation may vary by LME/MCO. Providers should contact their respective LME/MCO for additional information. (4/24/2020)	Webinars Hosted 4/7-8/2020

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Relative as Provider	What is the process for a family member to be reimbursed for providing services?	Processes for implementation may vary by LME/MCO. Relatives/Family must be employed by a provider agency or EOR (for Beneficiaries who self direct). Relatives/ Family members should contact their respective provider and LME/MCO to inform them of their request and request additional information. Relatives/Family members must provide documentation of a high school diploma, GED or higher, and must complete hiring documentation required by the provider. Background checks must be completed within 90 days of hire. Service documentation must be completed. (5/5/2020)	North Carolina Council on Developmental Disabilities (NCCDD)
Relative as Provider	What services can relatives of adults receiving services provide to Innovations Waiver beneficiaries?	Relatives of adult waiver beneficiaries may provide Community Living and Supports, Day Supports, Supported Employment, Supported Living and Community Networking. (4/24/2020)	LME/MCO Clinical Director's Call
Relative as Provider	You mention when hiring a parent as an innovations participant that they require training within a 90 day period. Does this include certifications (NCI / CPR/First Aid). I ask this because you also mentioned that new hires DO require these certifications before starting to provide services. Are both statements true?	Appendix K allows for relatives of adult waiver beneficiaries to provide services to beneficiaries in Supported Living arrangements prior to background checks and training for 90 days. It also allows for relatives of adult waiver beneficiaries who reside in the home and out of the home to provide services prior to background check and training for 90 days. This applies to NCI or prevention and de-escalation training, CPR and First Aid. New hires that are not relatives of adult waiver beneficiaries are required to obtain all trainings required by the provider agency in order to provide services. (4/28/2020)	Webinar Hosted 4.21.2020
Retainer Payments	[Are R]etainer payments for B3 services?	No, not at this time. Retainer payments may be paid for Innovations Community Living and Supports, Day Supports, Community Networking, Supported Employment or Residential Supports under Innovations Waiver and Personal Care for TBI Waiver and who meet retainer payment requirements. (4/29/2020)	Webinar Hosted 4.21.2020

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Retainer Payments	[N]ot all [LME/]MCOs have released information regarding retainer payments. What is DHHS's expectation? Do they have a deadline for publishing this information?	Retainer payments are paid through the provider agency. Processes for implementation may vary by LME/MCO. Providers should contact their respective LME/MCO for additional information. LME/MCOs have published information on their websites as well. (4/28/2020)	Webinar Hosted 4.21.2020
Retainer Payments	[O]ur MCO has us billing in order to receive retainer payments for staff out of work and we are still able to provide the service so in effect we are double billing but this does not match what was just presented.	Retainer payments function to retain the existing staff. Modifiers are being utilized to track services being delivered verses retainer payments. Retainer payments are paid through the provider agency. Processes for implementation may vary by LME/MCO. Providers should contact their respective LME/MCO for additional information. (4/28/2020)	Webinar Hosted 4.21.2020
Retainer Payments	[W]hat exactly do retainer payments cover? Do they cover AFL [Alternative Family Living] providers?	Yes, the retainer payments may cover AFL providers. Retainer payments may be paid per the approved hours staff typically were working on or before March 13, 2020. Retainer payments are for direct care providers who normally provide services that include habilitation and personal care (including residential supports), but are currently unable to due to complications experienced during the COVID-19 pandemic because the waiver participant is sick due to COVID-19; or the waiver participant is sequestered and/or quarantined based on local, state, federal and/or medical requirements/orders. Retainer payments cannot be made for Respite. (4/29/2020)	Webinar Hosted 4.21.2020

I/DD & TBI COVID-19 Frequently Asked Questions (FAQ)

Category	Question	Answer(s)	Source
Retainer Payments	Are employees eligible for retainer payments if the residential provider has chosen to keep members at the facility and not [for] them receive Day Supports [at a facility]?	Retainer payments may be paid per the approved hours staff typically were working on or before March 13, 2020. Retainer payments are for direct care providers who normally provide services that include habilitation and personal care, but are currently unable to due to complications experienced during the COVID-19 pandemic because the waiver participant is sick due to COVID-19; or the waiver participant is sequestered and/or quarantined based on local, state, federal and/or medical requirements/orders. Retainer payments cannot be made for Respite. (4/28/2020)	Webinar Hosted 4.21.2020
Retainer Payments	Are non innovation IPRS [state-funded] group participants covered under this and would their DSPs [direct support professionals] be eligible for [retainer] payments?	Appendix K only applies to the Innovations Waiver, TBI Waiver and Innovations (b)(3) Deinstitutionalization services. In turn, staff providing state-funded services are not eligible for retainer payments. (4/29/2020)	Webinar Hosted 4.21.2020
Retainer Payments	Are retainer payments. Is it the full amount/rate? Do if someone typically only had 3 days a week, they receive that for each 3 days for a period of 30 days? [If staff worked 3 days a week prior to March 13, 2020, will they receive full amount for 3 days a week in retainer payments?]	Retainer payments may be paid per the approved hours staff typically were working on or before March 13, 2020. Retainer payments are for direct care providers who normally provide services that include habilitation and personal care, but are currently unable to due to complications experienced during the COVID-19 pandemic because the waiver participant is sick due to COVID-19; or the waiver participant is sequestered and/or quarantined based on local, state, federal and/or medical requirements/orders. Retainer payments cannot be made for Respite. (4/24/2020)	

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Retainer Payments	Can a staff who is able to work in a different capacity (i.e. with a different member) still qualify for a retainer payment for their primary member?	Retainer payments should not overlap with hours worked. (For example, if the staff typically works 30 hours a week and now works 30 hours a week, the staff would not be eligible for retainer payments. If that same staff was now working 10 hours a week, they would be eligible for 20 hours a week in retainer payments. Questions regarding service rate differences should be directed to the provider agency providing retainer payments.) Retainer payments may be paid per the approved hours staff typically were working on or before March 13, 2020. Retainer payments are for direct care providers who normally provide services that include habilitation and personal care, but are currently unable to due to complications experienced during the COVID-19 pandemic because the waiver participant is sick due to COVID-19; or the waiver participant is sequestered and/or quarantined based on local, state, federal and/or medical requirements/orders. Retainer payments cannot be made for Respite. (4/29/2020)	Webinar Hosted 4.21.2020
Retainer Payments	Can retainer payment be paid to staff because the beneficiary does not want outside people coming into the home because of risk of virus transmission?	Retainer payments may be paid per the approved hours staff typically were working on or before March 13, 2020. Retainer payments are for direct care providers who normally provide services that include habilitation and personal care, but are currently unable to due to complications experienced during the COVID-19 pandemic because the waiver participant is sick due to COVID-19; or the waiver participant is sequestered and/or quarantined based on local, state, federal and/or medical requirements/orders. Retainer payments cannot be made for Respite. (4/24/2020)	Webinars Hosted 4/7-8/2020
Retainer Payments	Can retainer payments be retroactive to 3/13/2020?	Retainer payments are retroactive to March 13, 2020. (4/24/2020)	Webinars Hosted 4/7-8/2020

I/DD & TBI COVID-19 Frequently Asked Questions (FAQ)

Category	Question	Answer(s)	Source
Retainer Payments	Can staff be eligible for retainer payments if they cannot work because of child care?	Retainer payments may be paid per the approved hours staff typically were working on or before March 13, 2020. Retainer payments are for direct care providers who normally provide services that include habilitation and personal care, but are currently unable to due to complications experienced during the COVID-19 pandemic because the waiver participant is sick due to COVID-19; or the waiver participant is sequestered and/or quarantined based on local, state, federal and/or medical requirements/orders. Retainer payments cannot be made for Respite. Childcare resources can be found here: https://www.ncdhhs.gov/divisions/public-health/covid19/child-care (4/28/2020)	Webinar Hosted 4.21.2020
Retainer Payments	Can the retainer payments be back dated to a prior date.	Yes. Retainer payments may be paid per the approved hours staff typically were working on or before March 13, 2020. Retainer payments are for direct care providers who normally provide services that include habilitation and personal care, but are currently unable to due to complications experienced during the COVID-19 pandemic because the waiver participant is sick due to COVID-19; or the waiver participant is sequestered and/or quarantined based on local, state, federal and/or medical requirements/orders. Retainer payments cannot be made for Respite. (4/28/2020)	Webinar Hosted 4.21.2020

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Retainer Payments	Do the Retainer Payments reflect the services on the ISP for EOR [Employers of Record]'s?	Retainer payments may be paid per the approved hours staff typically were working on or before March 13, 2020. Retainer payments are for direct care providers who normally provide services that include habilitation and personal care, but are currently unable to due to complications experienced during the COVID-19 pandemic because the waiver participant is sick due to COVID-19; or the waiver participant is sequestered and/or quarantined based on local, state, federal and/or medical requirements/orders. Retainer payments cannot be made for Respite. (4/24/2020)	Webinars Hosted 4/7-8/2020
Retainer Payments	Does “sick with COVID-19” mean that a person has to have a positive COVID-19 test.	No. This means a person has symptoms related to COVID-19 as identified by NC DHHS COVID-19 Symptoms that can be found at this link: https://www.ncdhhs.gov/divisions/public-health/covid19/symptoms-and-testing/covid-19-symptoms . (4/21/2020)	LME/MCO Clinical Director's Call
Retainer Payments	Does retainer payments [c]ome directly from the staff's employer or from the MCO [Managed Care Organization]? When do the staff start receiving the payment?	Retainer payments are paid through the provider agency. Processes for implementation may vary by LME/MCO. Providers should contact their respective LME/MCO for additional information. (4/24/2020)	Webinars Hosted 4/7-8/2020
Retainer Payments	Does the slide regarding retainer payments also refer to those on the Innovations Waiver as well as TBI [Traumatic Brain Injury]?	Retainer Payments are applicable to direct support staff providing Innovations and Traumatic Brain Injury services. (4/24/2020)	
Retainer Payments	Does the Stay-At-Home Order count as Sequestering?	Yes, a state, federal, or local stay-at home order is equivalent to sequestering. (4/21/2020)	LME/MCO Clinical Director's Call

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Retainer Payments	How do we bill the retainer payment for staff.	Retainer payments are paid through the provider agency. Processes for implementation may vary by LME/MCO. Providers should contact their respective LME/MCO for additional information. (4/28/2020)	Webinar Hosted 4.21.2020
Retainer Payments	If a portion of the hours are delivered via telehealth by the primary staff, would the provider agency bill the retainer payment for only the remaining hours or for all the hours the primary staff typically works? (i.e. primary staff typically works 40 hours/week, provides 5 hours/week via telehealth, provider agency would bill 40 or 35?)	Please also see our Special Medicaid Bulletins: https://medicaid.ncdhhs.gov/blog/2020/05/01/special-bulletin-covid-19-75-telehealth-and-virtual-patient-communications-clinical hours provided via telehealth need to be documented appropriately and billed using the appropriate modifiers. In the example provided, if the staff provides 5 hours via telehealth, the provider would bill for 5 hours with the appropriate telehealth modifiers. If the primary staff is unable to provide the other 35 due to COVID19 related circumstances, then the 35 hours could be billed for a retainer payment using the CR Xu modifier and the staff would then be paid for the typical 40 hours a week that they would normally work. (5/5/2020)	Webinars Hosted 4/7-8/2020
Retainer Payments	If a relative provides services normally provided by direct staff can the relative be paid for the services and the provider direct staff be paid for the same member for the retainer payment?	Yes, if the family or another staff is providing the services; the staff can still get the retainer payment. This is for staff that typically provide the services on a regular basis, fill in staff are not subject to retainer payments. The RADSE (relative as provider) staff documents for services required and the Provider agency bills the LME/MCO for the retainer payments following the LME/MCO policy. Providers are encouraged to speak to the beneficiaries LME/MCO for specific provider instructions on how to receive retainer payments. (4/28/2020)	Webinar Hosted 4.21.2020
Retainer Payments	If staff has applied for unemployment but is on a lengthy wait time to hear back on the claim, is it possible to withdraw that claim so that staff can get retainer payments?	Staff who receive unemployment benefits are not eligible to receive retainer payments. Direct Care Staff should contact the Division of Employment Security regarding claims and processes to make changes if desired. (4/29/2020)	Webinar Hosted 4.21.2020

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Retainer Payments	If the primary staff cannot work but the parent bills as R[A]DSE or another staff provide the services, can primary staff get a retainer payment?	Yes, if the family or another staff is providing the services; the staff can still get the retainer payment. This is for staff that typically provide the services on a regular basis, fill in staff are not subject to retainer payments. The RADSE (relative as provider) staff documents for services required and the Provider agency bills the LME/MCO for the retainer payments following the LME/MCO policy. Please speak to the beneficiaries LME/MCO for specific provider instructions on how to receive retainer payments. (4/24/2020)	
Retainer Payments	If the stay at home order is lifted, will retainer payments continue?	If a Stay-at-Home order is not in place, the waiver beneficiary would need to be sick due to COVID-19 or have a medical requirement/order in place. Retainer payments may be paid per the approved hours staff typically were working on or before March 13, 2020. Retainer payments are for direct care providers who normally provide services that include habilitation and personal care, but are currently unable to due to complications experienced during the COVID-19 pandemic because the waiver participant is sick due to COVID-19; or the waiver participant is sequestered and/or quarantined based on local, state, federal and/or medical requirements/orders. Retainer payments cannot be made for Respite. (4/28/2020)	Webinar Hosted 4.21.2020

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Category	Question	Answer(s)	Source
Retainer Payments	If we have already laid staff off, can we use retainer payments to bring them back?	Retainer payments may be paid per the approved hours staff typically were working on or before March 13, 2020. Retainer payments are for direct care providers who normally provide services that include habilitation and personal care, but are currently unable to due to complications experienced during the COVID-19 pandemic because the waiver participant is sick due to COVID-19; or the waiver participant is sequestered and/or quarantined based on local, state, federal and/or medical requirements/orders. Retainer payments cannot be made for Respite. Retainer payments can be made retroactive to March 13, 2020. Processes for implementation may vary by LME/MCO. Providers should contact their respective LME/MCO for additional information. (4/29/2020)	Webinar Hosted 4.21.2020
Retainer Payments	Includes EOR [Employers of Record] Representatives that are relatives also?	Retainer payments may be paid per the approved hours staff typically were working on or before March 13, 2020. Retainer payments are for direct care providers who normally provide services that include habilitation and personal care, but are currently unable to due to complications experienced during the COVID-19 pandemic because the waiver participant is sick due to COVID-19; or the waiver participant is sequestered and/or quarantined based on local, state, federal and/or medical requirements/orders. Retainer payments cannot be made for Respite. (4/24/2020)	

I/DD & TBI COVID-19 Frequently Asked Questions (FAQ)

Category	Question	Answer(s)	Source
Retainer Payments	Since all of NC is under stay at home order, then this would be available for all staff (outside of respite)?	This applies to staff who provide Community Living and Supports, Day Supports, Community Networking, Supported Employment or Residential Supports for Innovations Waiver Beneficiaries and Personal Care for TBI Waiver beneficiaries and who meet retainer payment requirements. (Retainer payments are unable to be paid for (b)(3) DI (deinstitutionalization) services. Retainer payments may be paid per the approved hours staff typically were working on or before March 13, 2020. Retainer payments are for direct care providers who normally provide services that include habilitation and personal care, but are currently unable to due to complications experienced during the COVID-19 pandemic because the waiver participant is sick due to COVID-19; or the waiver participant is sequestered and/or quarantined based on local, state, federal and/or medical requirements/orders. Retainer payments cannot be made for Respite and Life Skills Training. (4/24/2020)	
Retainer Payments	So if the family or AFL refuse staff to come in their home because of the stay at home order we can bill for the service and pay staff due to the sequester?	Retainer payments may be paid per the approved hours staff typically were working on or before March 13, 2020. Retainer payments are for direct care providers who normally provide services that include habilitation and personal care, but are currently unable to due to complications experienced during the COVID-19 pandemic because the waiver participant is sick due to COVID-19; or the waiver participant is sequestered and/or quarantined based on local, state, federal and/or medical requirements/orders. Retainer payments cannot be made for Respite. (4/28/2020)	Webinar Hosted 4.21.2020

I/DD & TBI COVID-19 Frequently Asked Questions (FAQ)

Category	Question	Answer(s)	Source
Retainer Payments	What happens to the retainer payment for staff if someone else (a fill-in staff or RAP [Relative as Provider]) picks up the hours or the portion of the hours the previous primary staff worked?	Retainer payments may be paid per the approved hours staff typically were working on or before March 13, 2020. Retainer payments are for direct care providers who normally provide services that include habilitation and personal care, but are currently unable to due to complications experienced during the COVID-19 pandemic because the waiver participant is sick due to COVID-19; or the waiver participant is sequestered and/or quarantined based on local, state, federal and/or medical requirements/orders. Retainer payments cannot be made for Respite. (4/24/2020)	Webinars Hosted 4/7-8/2020
Retainer Payments	What is family is choosing to sequester?	Retainer payments may be paid per the approved hours staff typically were working on or before March 13, 2020. Retainer payments are for direct care providers who normally provide services that include habilitation and personal care, but are currently unable to due to complications experienced during the COVID-19 pandemic because the waiver participant is sick due to COVID-19; or the waiver participant is sequestered and/or quarantined based on local, state, federal and/or medical requirements/orders. Retainer payments cannot be made for Respite. (4/24/2020)	
Retainer Payments	What is the process for paying retainer payments to staff? Should this be facilitated by the agency or the care coordinator?	Retainer payments are paid through the provider agency. Processes for implementation may vary by LME/MCO. Providers should contact their respective LME/MCO for additional information. (4/24/2020)	Webinars Hosted 4/7-8/2020
Retainer Payments	What is the service that [the presenter] said does not qualify for retainer payments due to rehabilitative nature?	Eligible services for retainer payments are as follows: Community Living and Supports, Day Supports, Community Networking, Supported Employment or Residential Supports under Innovations Waiver and Personal Care for TBI Waiver and who meet retainer payment. Retainer payments cannot be made for Respite and Life Skills Training. (4/24/2020)	Webinar Hosted 4.21.2020

I/DD & TBI COVID-19 Frequently Asked Questions (FAQ)

Category	Question	Answer(s)	Source
Retainer Payments	What services are eligible for retainer payments?	Community Living and Supports, Day Supports, Community Networking, Supported Employment or Residential Supports under Innovations Waiver and Personal Care for TBI Waiver and who meet retainer payment requirements. (4/24/2020)	LME/MCO Clinical Director's Call
Retainer Payments	When can we expect more information on how to submit retainer payments?	Retainer payments are paid through the provider agency. Processes for implementation may vary by LME/MCO. Providers should contact their respective LME/MCO for additional information. (4/28/2020)	Webinar Hosted 4.21.2020
Retainer Payments	When will the modifiers be out for the retainer?	Provider(s) shall follow applicable modifier guidelines. Modifier CR and XU (catastrophe/disaster related) must be appended to all claims for CPT and HCPCS codes listed in this policy to relax frequency limitations defined in code definitions. Please also see our Special Medicaid Bulletins: https://medicaid.ncdhhs.gov/blog/2020/05/01/special-bulletin-covid-19-75-telehealth-and-virtual-patient-communications-clinical (5/5/2020)	Webinar Hosted 4.21.2020
Retainer Payments	Where can information be found about the retainer [payments]?	Retainer payments are paid through the provider agency. Processes for implementation may vary by LME/MCO. Providers should contact their respective LME/MCO for additional information. (4/24/2020)	Webinars Hosted 4/7-8/2020
Retainer Payments	Will LME/MCOs have a standardized process for providers to submit invoices/claims for retainer payments?	Retainer payments are paid through the provider agency. Processes for implementation may vary by LME/MCO. Providers should contact their respective LME/MCO for additional information. (4/28/2020)	Webinar Hosted 4.21.2020

I/DD & TBI COVID-19 Frequently Asked Questions (FAQ)

Category	Question	Answer(s)	Source
Retainer Payments	Will RADSE [Relative as Direct Support Employee] be able to get retainer payments?	Yes. Retainer payments may be paid per the approved hours staff typically were working on or before March 13, 2020. Retainer payments are for direct care providers who normally provide services that include habilitation and personal care, but are currently unable to due to complications experienced during the COVID-19 pandemic because the waiver participant is sick due to COVID-19; or the waiver participant is sequestered and/or quarantined based on local, state, federal and/or medical requirements/orders. Retainer payments cannot be made for Respite. (4/24/2020)	
Retainer Payments	Will staff who are receiving FMLA [Family Medical Leave Act] under the Families First Act be excluded from retainer payments?	The FMLA entitles eligible employees of covered employers to take unpaid, job-protected leave for specified family and medical reasons with continuation of group health insurance coverage under the same terms and conditions as if the employee had not taken leave. Retainer payments are paid through the provider agency. Processes for implementation may vary by LME/MCO. Providers should contact their respective LME/MCO for additional information. (4/24/2020)	
Retainer Payments	Would direct [care] staff receiving retainer payments, still be allowed to collect unemployment benefits as well?	No, staff who receive unemployment benefits are not eligible to receive retainer payments. (4/24/2020)	Webinars Hosted 4/7-8/2020
Service Delivery	[C]an AFL providers provide day supports, community networking or supported employment to the beneficiary in their home?	The current Appendix K does not allow the primary AFL staff to provide services to the same individual they provide residential services to. However, the allowance for AFL staff to provide such services are being addressed in the recently submitted second Appendix K. New goals should ultimately align with long range outcomes identified in the existing individual support plan. Providers should contact their respective LME/MCO for additional information regarding documentation. (5/5/2020)	Webinar Hosted 4.21.2020

I/DD & TBI COVID-19 Frequently Asked Questions (FAQ)

Category	Question	Answer(s)	Source
Service Delivery	A person with Supported Living is going back to their family home during COVID-19. What service would they receive?	The appropriate service would be Community Living and Supports. (4/21/2020)	LME/MCO Clinical Director's Call
Service Delivery	AFL homes are generally contracted with a person for the service. The AFL provider is generally not an employee of the provider agency. Services can be provided in an AFL home if not provided by the primary AFL contracted for services in the home. <u>Can services be provided by another contracted employee in the AFL home?</u>	Yes. Appendix K allows for Day Supports, Community Living and Supports, Supported Employment and Community Networking to be provided in the home of the participant, the home of the direct care worker, or the residential setting. Residential setting refers to the setting types listed in the Residential Service definition in the approved NC Innovations Waiver. Licensed and Unlicensed AFLs are identified in the Residential Supports Service definition. (4/24/2020)	Webinars Hosted 4/7-8/2020
Service Delivery	Are there any guidelines on admission as it relates to COVID from a psychiatric hospital to an AFL or licensed I/DD Facility?	Guidance can be found at: https://files.nc.gov/ncdhhs/documents/files/covid-19/COVID-19-Best-Practices-in-Congregate-Settings-Webinar-Supplement.pdf AND https://www.ncdhhs.gov/divisions/public-health/covid19/covid-19-guidance#long-term-care-facilities (5/5/2020)	Webinar Hosted 4.21.2020
Service Delivery	Can AFL providers provide Day Supports to their own respective AFL consumer?	The current Appendix K does not allow the primary AFL staff to provide services to the same individual they provide residential services to. However, the allowance for AFL staff to provide such services are being addressed in the recently submitted second Appendix K. Providers should contact their respective LME/MCO for additional information regarding documentation. (5/5/2020)	Webinar Hosted 4.21.2020
Service Delivery	Can community networking be used to support a member in a Virtual Class or Conference?	Yes. This would be the staff person supporting the Innovations Member with accessing and participating in an Online class or Online Conference. (4/21/2020)	LME/MCO Clinical Director's Call

I/DD & TBI COVID-19 Frequently Asked Questions (FAQ)

Category	Question	Answer(s)	Source
Service Delivery	Can providers that do not have a Day Supports license provide Day Supports in their Innovations or TBI Residential Setting?	Appendix K allows for Day Supports, Community Living and Supports, Supported Employment and Community Networking to be provided in the home of the participant, the home of the direct care worker, or the residential setting. Residential setting refers to the setting types listed in the Residential Service definition in the approved NC Innovations Waiver. Services are able to be provided by alternative provider agency staff not typically providing the residential services. Providers should contact their respective LME/MCO for additional information regarding processes (4/29/2020)	Webinar Hosted 4.21.2020
Service Delivery	Can staff providing Residential Supports in a group home also bill for DS/CN/SE during the Appendix K?	Yes, except for in the case of an AFL provider. However, the allowance for AFL staff to provide such services are being addressed in the recently submitted second Appendix K. (5/5/2020)	Webinar Hosted 4.21.2020
Service Delivery	Can the AFL provider provide day support services?	No. AFL staff cannot provide day support services to the individual that they provide residential support services to. A second appendix K has been submitted to request this.(5/5/2020)	Webinars Hosted 4/7-8/2020
Service Delivery	Can the same GH [group home] staff member bill for the Residential Supports and Day Supports on the same day in the group home?	Yes, except for in the case of an AFL provider. However, the allowance for AFL staff to provide such services are being addressed in the recently submitted second Appendix K. (5/5/2020)	Webinar Hosted 4.21.2020
Service Delivery	Can unrelated Legal Guardian of Innovations participant provide Day Supports service if living in the same home? Ex: Legal Guardian is married to primary AFL provider. [Rephrased question: Can Legal Guardians that are NOT relatives of the Innovations participant provide services?]	Legal guardians, who are not relatives of the individual served, are unable to provide waiver services to waiver participants at this time. Please reference House Bill 543 (2013) at the following link: https://www.ncleg.gov/EnactedLegislation/Statutes/HTML/BySection/Chapter_35A/GS_35A-1213.html (5/5/2020)	Webinar Hosted 4.21.2020

I/DD & TBI COVID-19 Frequently Asked Questions (FAQ)

Category	Question	Answer(s)	Source
Service Delivery	How can families and individuals with disabilities learn more about the new Innovations ways of receiving and providing support during the Covid-19 crisis?	The most current policy flexibilities can be found at the following link: https://medicaid.ncdhhs.gov/about-us/covid-19-guidance-and-resources/providers/covid-19-policy-flexibilities Please also see our Special Medicaid Bulletins: https://medicaid.ncdhhs.gov/blog/2020/05/01/special-bulletin-covid-19-75-telehealth-and-virtual-patient-communications-clinical (5/5/2020)	North Carolina Council on Developmental Disabilities (NCCDD)
Service Delivery	How do we document the services provided in the gap between 3/13 [March 13t, 2020 and the Appendix K announcement since we didn't know we would have the flexibility to bill this service	Processes for implementation may vary by LME/MCO. Providers should contact their respective LME/MCO for additional information. (4/29/2020)	Webinar Hosted 4.21.2020
Service Delivery	If [the] sole parent is hospitalized for COVID who could care for disabled adult 24/7 until parent returns home?	Crisis Planning is an integral part of the person-centered planning process. Waiver beneficiaries/guardians can review their current crisis plan and contact their Care Coordinator to request updates and support with further crisis planning. Families can also obtain additional information from the NC Council on Developmental Disabilities at the following link: https://nccdd.org/ (4/24/2020)	Webinars Hosted 4/7-8/2020
Service Delivery	If there is a member in an AFL and they go to Day Support. The Day Support is closed. The AFL provide[r] is going to start to provide Community Networking. Will the provider need to create and get signed short term goals for Community Networking since this is a new service?	<i>The current Appendix K does not allow the primary AFL staff to provide services to the same individual they provide residential services to . However, the allowance for AFL staff to provide such services are being addressed in the recently submitted second Appendix K. New goals should ultimately align with long range outcomes identified in the existing individual support plan. Providers should contact their respective LME/MCO for additional information regarding documentation. (4/29/2020)</i>	Webinar Hosted 4.21.2020

I/DD & TBI COVID-19 Frequently Asked Questions (FAQ)

Category	Question	Answer(s)	Source
Service Delivery	If there is a requirement for an LME/MCO to monitor onsite long-term vocational supports (LTVS) can it go to telephonic, video, and or desk review?	Appendix K allows for the following: Waive the face-to-face requirements for quarterly care coordinator/beneficiary meetings. Individuals who do not receive at least one service per month will receive monthly monitoring (which can be telephonic) as quarterly meetings are not sufficient for such individuals. Monthly and quarterly monitoring will occur telephonically. This Telephonic assessment / monitoring will be conducted in accordance with HIPAA requirements. (5/5/2020)	Webinar Hosted 4.21.2020
Service Delivery	Out of state respite was briefly covered [on the webinar]- are there provisions for regular innovations services to be provided out of state and what reporting should be followed for this?	Community Living and Supports and Day Supports can be provided out of state. Providers should contact their respective LME/MCO for additional information regarding documentation. (5/5/2020)	Webinar Hosted 4.21.2020
Service Delivery	Primary AFL staff can not provide Day supports, but can Primary Group Home staff provide Day Support Group?	The current Appendix K does not allow primary AFL staff to provide services to the same individual they provide residential services to. Appendix K allows for Day Supports, Community Living and Supports, Supported Employment and Community Networking to be provided in the home of the participant, the home of the direct care worker, or the residential setting. Residential setting refers to the setting types listed in the Residential Service definition in the approved NC Innovations Waiver. Services are able to be provided by alternative provider agency staff. Providers should contact their respective LME/MCO for additional information regarding processes and documentation. (5/5/2020)	Webinar Hosted 4.21.2020
Service Delivery	What happens when a family member takes a innovations waiver member out of a group home because they have restricted visitation. Can the family get community living supports for the weekends?	Additional or alternative services may be requested to support the waiver beneficiary. The Waiver beneficiary and/or legally responsible party should contact their respective LME/MCO regarding applicable processes. (4/24/2020)	Webinars Hosted 4/7-8/2020

I/DD & TBI COVID-19 Frequently Asked Questions (FAQ)

Category	Question	Answer(s)	Source
Service Delivery	Who should I/we call if Direct Support Professionals do not show up when they are needed due to the COVID-19 crisis?	Please contact the provider agency. Additional support may be requested from the LME/MCO if needed. (4/24/2020)	North Carolina Council on Developmental Disabilities (NCCDD)
Service Delivery	Will providers be allowed to provide day supports individual instead of day supports group if group is not an option from home?	Additional or alternative services may be requested to support the waiver beneficiary. The Waiver beneficiary and/or legally responsible party should contact their respective LME/MCO regarding applicable processes. (4/24/2020)	Webinars Hosted 4/7-8/2020
Service Delivery	Will the residential Provider receive a temporary authorization to provide Day Services that were provided by another Provider's Day Program?	<i>The current Appendix K does not allow primary AFL staff to provide services to the same individual they provide residential services to .</i> Appendix K allows for Day Supports, Community Living and Supports, Supported Employment and Community Networking to be provided in the home of the participant, the home of the direct care worker, or the residential setting. Residential setting refers to the setting types listed in the Residential Service definition in the approved NC Innovations Waiver. Services are able to be provided by alternative provider agency staff. Providers should contact their respective LME/MCO for additional information regarding processes and documentation. (4/29/2020)	Webinar Hosted 4.21.2020
Staff Training/Qualifications	[Are there] any flexibilities for med admin training?	No, there are no current flexibilities related to the Appendix K for medication administration training. (4/29/2020)	Webinar Hosted 4.21.2020
Staff Training/Qualifications	Does the flexibility regarding CPR/1st[First] Aid timing apply to Community Navigators as well?	Yes, this is inclusive of First Aid, CPR and trainings in prevention and de-escalation. This flexibility is only for current staff as of 3/13/2020. (4/29/2020)	Webinar Hosted 4.21.2020

I/DD & TBI COVID-19 Frequently Asked Questions (FAQ)

Category	Question	Answer(s)	Source
Staff Training/ Qualifications	DSP training question: we have existing staff that have been with us less than 90 days and were scheduled to have NCI training in April before the COVID-19 started. Will they be given an additional 90 extension on training or are they no longer allowed to work till we are able to get someone willing to do the training?	Appendix K allows relatives of adult waiver beneficiaries who reside in the home and out of the home to provide services prior to background check and training for 90 days. It also allows for existing staff to continue to provide services, for 90 days, when CPR and NCI re-certification has lapsed. This applies to Community Living and Supports, Crisis Services, Community Networking, Day Supports, Respite, Residential Supports, Supported Living, and Supported Employment. (4/29/2020)	Webinar Hosted 4.21.2020
Staff Training/ Qualifications	For CPR/FA, it says may continue to provide for 90 days, but then it says later that they should come into to compliance as soon as appendix K flexibilities expire, which is over a year from now.	Appendix K allows relatives of adult waiver beneficiaries who reside in the home and out of the home to provide services prior to background check and training for 90 days. It also allows for existing staff to continue to provide service, for 90 days, when CPR and NCI re-certification has lapsed. This applies to Community Living and Supports, Crisis Services, Community Networking, Day Supports, Respite, Residential Supports, Supported Living, and Supported Employment. (4/29/2020)	Webinar Hosted 4.21.2020
Staff Training/ Qualifications	Is First Aid included in the CPR – NCI (prevention/de-escalation training) language?	Yes, this is inclusive of First Aid, CPR and trainings in prevention and de-escalation. This flexibility is only for current staff as of 3/13/2020. (4/21/2020)	LME/MCO Clinical Director's Call
Staff Training/ Qualifications	What about new staff - can we waiver CPR/NCI?	New staff are required to receive all appropriate trainings before starting to provide services. (4/24/2020)	
Staff Training/ Qualifications	What do we do if someone has a college degree but cannot locate their high school diploma?	The staff will provide a copy of their College Degree or college transcript that indicate the individual has taken college level classes/courses. (4/21/2020)	LME/MCO Clinical Director's Call

I/DD & TBI COVID-19 Frequently Asked Questions (FAQ)

Category	Question	Answer(s)	Source
State-Funded Services	State has said that flexibilities apply to IPRS. Does that mean Appendix K for Innovations Day Supports also applies to IPRS Day Activity. Specifically, alternate settings.	Appendix K only applies to the Innovations Waiver, TBI Waiver and Innovations (b)(3) Deinstitutionalization services. The same flexibilities for Innovations Waiver Day Supports settings apply to state-funded Day Activity, Day Supports and ADVP (Adult Day Vocational Program) service definitions. Please also see our Special Medicaid Bulletins: https://medicaid.ncdhhs.gov/blog/2020/05/01/special-bulletin-covid-19-75-telehealth-and-virtual-patient-communications-clinical (5/5/2020)	Webinars Hosted 4/7-8/2020
State-Funded Services	Will there be the same flexibilities with services that are paid for by the state and not by Medicaid?	Appendix K only applies to the Innovations Waiver, TBI Waiver and Innovations (b)(3) Deinstitutionalization services. Please also see our Special Medicaid Bulletins: https://medicaid.ncdhhs.gov/blog/2020/05/01/special-bulletin-covid-19-75-telehealth-and-virtual-patient-communications-clinical (5/5/2020)	North Carolina Council on Developmental Disabilities (NCCDD)
Supervision	[D]o supervision agreements need to be updated prior to doing supervision telephonically?	Supervision/monitoring is determined by the individualized supervision plans established by the provider required by 10A NCAC 27G. 0104 and 10A NCAC 27G. 0204. If a provider agency needs to adjust face-to-face supervision with their Direct Care Staff then the Qualified professional should update the supervision plan to allow for telephonic or audio-visual supervision. (4/24/2020)	Webinar Hosted 4.21.2020
Supervision	Can you clarify that monthly telephonic monitoring applies not only to Care Coordinators but to Service Supervisors from provider agencies as well? Especially since Service Supervisors are currently required to go into multiple homes each month for RADSE [Relative as Direct Support Employee]s and staff who provide services in their own home.	Supervision/monitoring is determined by the individualized supervision plans established by the provider required by 10A NCAC 27G. 0104 and 10A NCAC 27G. 0204. If a provider agency needs to adjust face-to-face supervision with their Direct Care Staff then the Qualified professional should update the supervision plan to allow for telephonic or audio-visual supervision. (4/24/2020)	Webinars Hosted 4/7-8/2020

I/DD & TBI COVID-19 Frequently Asked Questions (FAQ)

Category	Question	Answer(s)	Source
Supervision	To clarify, as long as QPs add to the staff's supervision contract that monitoring will be provided telephonically, it will be approved/acceptable during the COVID-19 Appendix K Flexibility period.	Supervision/monitoring is determined by the individualized supervision plans established by the provider required by 10A NCAC 27G. 0104 and 10A NCAC 27G. 0204. If a provider agency needs to adjust face-to-face supervision with their Direct Care Staff then the Qualified Professional should update the supervision plan to allow for telephonic or audio-visual supervision. (4/24/2020)	Webinar Hosted 4.21.2020
Telehealth	[C]an we bill for telehealth services? We've asked this before but we've not gotten clarity and hope that you can provide guidance.	Flexibilities related to telehealth for Innovations Waiver services can be found under the following Special Medicaid Bulletins: https://medicaid.ncdhhs.gov/blog/2020/05/01/special-bulletin-covid-19-75-telehealth-and-virtual-patient-communications-clinical (5/5/2020)	Webinar Hosted 4.21.2020
Telehealth	Can a Direct Support Professional provide support using a phone, FaceTime, or other ways to connect through technology?	Please see Medicaid Special Bulletin #75 https://medicaid.ncdhhs.gov/blog/2020/05/01/special-bulletin-covid-19-75-telehealth-and-virtual-patient-communications-clinical (5/1/2020)	North Carolina Council on Developmental Disabilities (NCCDD)
Telehealth	Can Innovations Day Supports and/or Supported Employment be billed telephonically? two way audio visual?	Flexibilities related to telehealth for Innovations Waiver services can be found under the following Special Medicaid Bulletins: https://medicaid.ncdhhs.gov/blog/2020/05/01/special-bulletin-covid-19-75-telehealth-and-virtual-patient-communications-clinical (5/5/2020)	Webinar Hosted 4.21.2020
Telehealth	Can Respite be provided via telehealth?	No, respite may not be provided via telehealth. (5/5/2020)	Webinar Hosted 4.21.2020
Telehealth	Can staff provide community living and support services via teleintervention if they are able to address the clients goals?	Please see Medicaid Special Bulletin #75 https://medicaid.ncdhhs.gov/blog/2020/05/01/special-bulletin-covid-19-75-telehealth-and-virtual-patient-communications-clinical (5/1/2020)	Webinars Hosted 4/7-8/2020

I/DD & TBI COVID-19 Frequently Asked Questions (FAQ)

Category	Question	Answer(s)	Source
Telehealth	Can the technical assistance portion of CLS be delivered via teleservice?	Flexibilities related to telehealth for Innovations Waiver services can be found under the following Special Medicaid Bulletins: https://medicaid.ncdhhs.gov/blog/2020/05/01/special-bulletin-covid-19-75-telehealth-and-virtual-patient-communications-clinical (5/5/2020)	Webinar Hosted 4.21.2020
Telehealth	Cognitive Rehab is a service unique to TBI Waiver. Will further guidance be coming out around TBI Waiver and Cognitive Rehabilitation Services and the ability to provide this service remotely?	Yes, please also see our Special Medicaid Bulletins: https://medicaid.ncdhhs.gov/blog/2020/05/01/special-bulletin-covid-19-75-telehealth-and-virtual-patient-communications-clinical (5/5/2020)	Webinar Hosted 4.21.2020
Telehealth	Special Bulletin #55 indicates the Appendix K covers telephonic contact with waiver beneficiary. How does this work within Innovations service array?	Flexibilities related to telehealth for Innovations Waiver services can be found under the following Special Medicaid Bulletins: https://medicaid.ncdhhs.gov/blog/2020/05/01/special-bulletin-covid-19-75-telehealth-and-virtual-patient-communications-clinical (5/5/2020)	Webinar Hosted 4.21.2020
Telehealth	What Innovations services can be provided via telephone or facetime/tele means?	Flexibilities related to telehealth for Innovations Waiver services can be found under the following Special Medicaid Bulletins: https://medicaid.ncdhhs.gov/blog/2020/05/01/special-bulletin-covid-19-75-telehealth-and-virtual-patient-communications-clinical (5/5/2020)	Webinar Hosted 4.21.2020

I/DD & TBI COVID-19 Frequently Asked Questions (FAQ)

Category	Question	Answer(s)	Source
Telehealth	You reference service authorization increases but will providers be allowed to provide a less intense services (from day supports individual to day supports group)? In this situation the individual is now isolated with only family and has supports to participate via telehealth group services that the guardian is requesting to participate in our group format. DSI [Day Supports-Individual] is not authorized for a group format and the guardian wants the interaction for the individual.	Yes, Day Supports may be changed from individual to group. Please see Medicaid Special Bulletin #75 https://medicaid.ncdhhs.gov/blog/2020/05/01/special-bulletin-covid-19-75-telehealth-and-virtual-patient-communications-clinical (5/5/2020)	Webinars Hosted 4/7-8/2020
Utilization Management	Can you clarify.... If the provider submits the SAR [Service Authorization Request] to increase services (during COVID 19) and medical necessity for the service is not met (i.e. parent wants 100 h/w a week just bc they do) the MCO cannot deny it?	Appendix K allows for an increase in service hours from what is in the person-centered plan without prior authorization during the Appendix K period outlined and for reasons related to COVID-19. Waiver beneficiaries and provider agencies should contact their respective LME/MCO regarding applicable processes. ***Note: This applies to LME-MCOs that typically have SARs submitted by the provider agency. (4/24/2020)	
Utilization Management	Flexibilities are for a full year. Can a LME/MCOs decide to give 3 month auths or should we strictly follow authorizing services for the year (until 3/12/21)?	Appendix K allows for an increase in service hours from what is in the person-centered plan without prior authorization during the Appendix K period outlined and for reasons related to COVID-19. Waiver beneficiaries and provider agencies should contact their respective LME/MCO regarding applicable processes. The LME/MCO would be able to adjust the approvals and send out due process if it exceeds the Appendix K authority. (4/21/2020)	Webinar Hosted 4.21.2020

I/DD & TBI COVID-19 Frequently Asked Questions (FAQ)

Category	Question	Answer(s)	Source
Utilization Management	For what the provider is required to provide to LME-MCO for no prior approval, may the LME-MCOs ask for MORE information, or are they (LME-MCO) only controlling the format and manner in which that information is communicated?	It is within the LME/MCOs purview to request additional information if there are concerns. Appendix K allows for an increase in service hours from what is in the person-centered plan without prior authorization during the Appendix K period outlined and for reasons related to COVID-19. Waiver beneficiaries and provider agencies should contact their respective LME/MCO regarding applicable processes. (4/29/2020)	Webinar Hosted 4.21.2020
Utilization Management	From a billing standpoint, if more hours that are authorized have been provided, what information has to be submitted?	Appendix K allows for an increase in service hours from what is in the person-centered plan without prior authorization during the Appendix K period outlined and for reasons related to COVID-19. Waiver beneficiaries and provider agencies should contact their respective LME/MCO regarding applicable processes. (4/29/2020)	Webinar Hosted 4.21.2020
Utilization Management	If a provider submits a SAR for an increase in services that does not meet medical necessity, can it be sent to peer review?	Appendix K allows for an increase in service hours from what is in the person-centered plan without prior authorization during the Appendix K period outlined and for reasons related to COVID-19 . Waiver beneficiaries and provider agencies should contact their respective LME/MCO regarding applicable processes. If the MCO receives a request and it doesn't meet medical necessity, the LME/MCO will send an adverse notice to the beneficiary. ***Note: Processes vary by LME-MCOs some have providers submit SARs and several the Care Coordinator submits SARS or TARS for Innovations Beneficiaries, contact the beneficiaries' LME/MCO if you have question this process (5/5/2020)	Webinars Hosted 4/7-8/2020
Utilization Management	If Community Networking is provided at "home", does it require a modifier when billed. Outside of flexibility this service cannot be provided in the person's home?	Modifiers are not required for services billed live and in person with the waiver beneficiary. (4/29/2020)	Webinar Hosted 4.21.2020

I/DD & TBI COVID-19 Frequently Asked Questions (FAQ)

Category	Question	Answer(s)	Source
Utilization Management	If individual gets services thru 2 agencies and one agency is closed then how can the hours be transferred to the one agency providing services?	Appendix K allows for an increase in service hours from what is in the person-centered plan without prior authorization during the Appendix K period outlined and for reasons related to COVID-19. Waiver beneficiaries and provider agencies should contact their respective LME/MCO regarding applicable processes. (4/24/2020)	Webinars Hosted 4/7-8/2020
Utilization Management	If the member is receiving Supported Living Level 3 and a natural support is providing night supervision, can the provide[r] still bill the 1 unit for the day since other hours of services were provided?	Yes as this service is billed at a daily rate. (4/29/2020)	Webinar Hosted 4.21.2020
Utilization Management	If UM approved services with Appendix K flexibilities and those authorizations extend past the Appendix K timeline, what are the next steps?	The LME/MCO needs to adjust the approvals and send out due process as it exceeds the Appendix K authority. (4/21/2020)	LME/MCO Clinical Director's Call
Utilization Management	If we do not have to wait for the authorization to do services what if it is denied and the services have already been provided?	Appendix K allows for an increase in service hours from what is in the person-centered plan without prior authorization during the Appendix K period outlined and for reasons related to COVID-19. Waiver beneficiaries and provider agencies should contact their respective LME/MCO regarding applicable processes. (4/24/2020)	Webinars Hosted 4/7-8/2020
Utilization Management	Some individuals we support at our day program are now sequestered at our residential locations. Can Individual Day Supports be billed as Group? How do we document the services provided in the gap between 3/13 and the Appendix K announcement since we didn't know we would have the flexibility to bill this service?	Day Supports Individual could be provided as Day Supports Group. Appendix K allows for an increase in service hours from what is in the person-centered plan without prior authorization during the Appendix K period outlined and for reasons related to COVID-19. Provider agencies should contact their respective LME/MCO regarding applicable processes. (4/29/2020)	Webinar Hosted 4.21.2020

I/DD & TBI COVID-19 Frequently Asked Questions (FAQ)

Category	Question	Answer(s)	Source
Utilization Management	What about exceeding hard limits?	Appendix K allows for an increase in service hours from what is in the person-centered plan without prior authorization during the Appendix K period outlined and for reasons related to COVID-19. Relatives as providers may not exceed 84 hours a week. In-school limits are waived while Executive Orders are in place closing schools. Waiver beneficiaries and provider agencies should contact their respective LME/MCO regarding applicable processes. (4/29/2020)	Webinar Hosted 4.21.2020
Utilization Management	What happens if the member requests/submits a SAR for additional services that do not appear to be medically necessary? Would the request still be subject to peer review?	Appendix K allows for an increase in service hours from what is in the person-centered plan without prior authorization for this time period. Waiver beneficiaries and provider agencies should contact their respective LME/MCO regarding applicable processes. (4/24/2020)	
Utilization Management	Will MCOs need to update authorizations, ISP, and budgets need to be updated eventually to match what was provided without prior authorization?	Appendix K allows for an increase in service hours from what is in the person-centered plan without prior authorization during the Appendix K period outlined and for reasons related to COVID-19. Waiver beneficiaries and provider agencies should contact their respective LME/MCO regarding applicable processes. (4/29/2020)	Webinar Hosted 4.21.2020
Utilization Management	Will there be a modifier for Day Support telehealth?	Flexibilities related to telehealth for Innovations Waiver services can be found under the following Special Medicaid Bulletins: https://medicaid.ncdhhs.gov/blog/2020/05/01/special-bulletin-covid-19-75-telehealth-and-virtual-patient-communications-clinical (5/5/2020)	Webinar Hosted 4.21.2020

I/DD & TBI COVID-19 Frequently Asked Questions (FAQ)

Category	Question	Answer(s)	Source
Waiver Slot/Services	If an individual chooses to stop receiving Medicaid Waiver services during COVID-19, will they lose their Medicaid Waiver slot or have their hours reduced after the state of emergency?	Waiver participants who do not use waiver services during this amendment will not lose their ability to continue to receive waiver services. This applies to participants who are not receiving services due to complications related to COVID-19. This applies to the Appendix K time period. (4/24/2020)	North Carolina Council on Developmental Disabilities (NCCDD)
Waiver Slot/Services	If an individual receives fewer services during the COVID-19 outbreak because Direct Support Professionals or other caregivers are not able to provide these services, will the individual have his/her services reduced?	Waiver participants who do not use waiver services during this amendment will not lose their ability to continue to receive waiver services. This applies to participants who are not receiving services due to complications related to COVID-19. This applies to the Appendix K time period. (4/24/2020)	North Carolina Council on Developmental Disabilities (NCCDD)
General	[I] was under the impression that the second Appendix K was being sent this week. When will it be sent to CMS?	The second Appendix K was submitted May 1, 2020. (5/5/2020)	Webinar Hosted 4.21.2020